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7590

08/24/2004

Robert L. Price, Esq.
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600 13th St., N.W.
Washington, DC 20005-3096

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(Depositor's name)
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"CUSTOMER NO.: 20277"

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/893,820	06/28/2001	Joseph Chappell	50229-387	5779

TITLE OF INVENTION: SYNTHASES
10/29/2004 JBALINA2 00000042 09893820

01 FC:1501	1370.00 DA					
02 FC:1504	300.00 DA					
03 FC:8001	6.00 DA					

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330 \$1370	\$300	\$1630 \$1670	11/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CLOW, LORI A	1631	435-325000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 McDERMOTT WILL &

2 EMERY LLP

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

1) THE UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION

LEXINGTON, KENTUCKY

2) THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

SAN DIEGO, CALIFORNIA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies TWO

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 500417 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Date 10/28/2004

Typed or printed name Judith L. Toffenetti

Registration No. 39,048

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